



RESPONSE UNDER 37 C.F.R. § 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 3737

03500.012596.1

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)	
	:	Examiner: S. Shaw
Shigeaki ONO	)	
	:	Group Art Unit: 3737
Application No.: 09/933,710	)	
	:	
Filed: August 22, 2001	)	
	:	
For: BLOOD FLOW MEASURING	)	August 3, 2004
APPARATUS	:	

**Mail Stop AF**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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**AUG 06 2004**  
TECHNOLOGY CENTER H3700

AMENDMENT AFTER FINAL REJECTION

Sir:

In response to the final Office Action dated May 3, 2004, in the above-identified application, Applicant respectfully requests that the application be amended as follows.

AF 61

In re Application of:

Shigeaki ONO

Application No.: 09/933,710

Filed: August 22, 2001

For: BLOOD FLOW MEASURING APPARATUS

Docket No. 03500.012596.1

Examiner: S. Shaw

Group Art Unit: 3737

Date: August 3, 2004



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Sir:

Transmitted herewith is an Amendment After Final Rejection in the above-identified application.

☒ No additional fee is required.

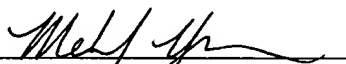
The fee has been calculated as shown below

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	5	MINUS	20	= 0	x \$9 \$18	\$ 0.00
INDEP. CLAIMS	1	MINUS	3	= 0	x \$43 \$86	\$ 0.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--						\$ 0.00

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.☐ A check in the amount of \$\_\_\_\_ is enclosed.

- ☐ Charge \$\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in Washington, D.C. by telephone at (202) 530-1010. All correspondence should continue to be directed to the address given below.

Respectfully submitted,

  
Attorney for Applicant  
Melody H. Wu  
Registration No. 52,376

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